WILD ROSE MANOR

P.O. BOX 391

WILD ROSE 54984 Phone: (920) 622-4342 Ownership: Non-Profit Corporation Operated from 1/1 To 12/31 Days of Operation: 365 Highest Level License: Skilled Operate in Conjunction with Hospital? Operate in Conjunction with CBRF? No Title 18 (Medicare) Certified? Number of Beds Set Up and Staffed (12/31/02): 78 Total Licensed Bed Capacity (12/31/02): 78 Title 19 (Medicaid) Certified? Yes Number of Residents on 12/31/02: 71 70

Services Provided to Non-Residents	Age, Sex, and Primary Diagn	Length of Stay (12/31/02)	용						
Home Health Care	No	Primary Diagnosis	%	 Age Groups	%	Less Than 1 Year	39.4		
Supp. Home Care-Personal Care	No					1 - 4 Years	46.5		
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	7.0	More Than 4 Years	14.1		
Day Services	No	Mental Illness (Org./Psy)	45.1	65 - 74	7.0				
Respite Care	No	Mental Illness (Other)	2.8	75 - 84	33.8		100.0		
Adult Day Care	Yes	Alcohol & Other Drug Abuse	0.0	85 - 94	39.4	********	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	1.4	95 & Over	12.7	Full-Time Equivalent	-		
Congregate Meals	No	Cancer	0.0			Nursing Staff per 100 Residents			
Home Delivered Meals No		Fractures	2.8		100.0	(12/31/02)			
Other Meals	No	Cardiovascular	22.5	65 & Over	93.0				
Transportation	No	Cerebrovascular	4.2			RNs	9.1		
Referral Service	No	Diabetes	0.0	Sex	용	LPNs	5.9		
Other Services	Yes	Respiratory	4.2			Nursing Assistants,			
Provide Day Programming for		Other Medical Conditions	16.9	Male	19.7	Aides, & Orderlies	39.7		
Mentally Ill	No			Female	80.3	i I			
Provide Day Programming for			100.0	•		I			
Developmentally Disabled	No				100.0	I			
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Average Daily Census:

Method of Reimbursement

		edicare			edicaid itle 19		Other			Private Pay			Family Care				anaged Care			
Level of Care	No.	90	Per Diem (\$)	No.	00	Per Diem (\$)	No.	90	Per Diem (\$)	No.	90	Per Diem (\$)	No.	00	Per Diem (\$)	No.	90	Per Diem (\$)	Total Resi- dents	- Of
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Skilled Care	2	100.0	260	52	100.0	99	0	0.0	0	17	100.0	113	0	0.0	0	0	0.0	0	71	100.0
Intermediate				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Limited Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain In	j 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Depende	nt 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	2	100.0		52	100.0		0	0.0		17	100.0		0	0.0		0	0.0		71	100.0

WILD ROSE MANOR

Admissions, Discharges, and	1	Percent Distribution	of Residents'	Condit	ions, Services, an	d Activities as of 12,	/31/02
Deaths During Reporting Period							
	1				% Needing		Total
ercent Admissions from:	I	Activities of	90	As	sistance of	% Totally	Number of
Private Home/No Home Health	22.1	Daily Living (ADL)	Independent	One	Or Two Staff	Dependent	Residents
Private Home/With Home Health	0.0	Bathing	8.5		64.8	26.8	71
Other Nursing Homes	3.5	Dressing	2.8		73.2	23.9	71
Acute Care Hospitals	74.4	Transferring	25.4		31.0	43.7	71
Psych. HospMR/DD Facilities	0.0	Toilet Use	14.1		47.9	38.0	71
Rehabilitation Hospitals	0.0	Eating	45.1		39.4	15.5	71
Other Locations	0.0 *	*******	*****	*****	*****	*****	******
otal Number of Admissions	86	Continence		%	Special Treatmen	ts	%
ercent Discharges To:	1	Indwelling Or Extern	al Catheter	5.6	Receiving Resp	iratory Care	9.9
Private Home/No Home Health	46.9	Occ/Freq. Incontinen	t of Bladder	47.9	Receiving Trac	heostomy Care	0.0
Private Home/With Home Health	6.2	Occ/Freq. Incontinen	t of Bowel	32.4	Receiving Suct	ioning	1.4
Other Nursing Homes	2.5	_			Receiving Osto	my Care	0.0
Acute Care Hospitals	6.2	Mobility			Receiving Tube	Feeding	1.4
Psych. HospMR/DD Facilities	0.0	Physically Restraine	d	2.8	Receiving Mech	anically Altered Diet:	31.0
Rehabilitation Hospitals	0.0				,	-	
Other Locations	4.9	Skin Care			Other Resident C	haracteristics	
Deaths	33.3	With Pressure Sores		8.5	Have Advance D	irectives	84.5
otal Number of Discharges	i	With Rashes		1.4	Medications		
(Including Deaths)	81 i				Receiving Psyc	hoactive Drugs	38.0

Selected Statistics: This Facility Compared to All Similar Rural Area Facilities & Compared to All Facilities

		Owne	ership:	Bed	Size:	Lic	ensure:				
	This	This Non		50	-99	Ski	lled	Ali	1		
	Facility	Peer	Group	Peer	Group	Peer	Group	Faci	lities		
	००	%	Ratio	90	Ratio	olo	Ratio	ଚ	Ratio		
Occupancy Rate: Average Daily Census/Licensed Beds	89.7	86.5	1.04	83.5	1.08	83.3	1.08	85.1	1.05		
Current Residents from In-County	81.7	79.3	1.03	72.9	1.12	75.8	1.08	76.6	1.07		
Admissions from In-County, Still Residing	27.9	23.9	1.17	22.2	1.26	22.0	1.27	20.3	1.37		
Admissions/Average Daily Census	122.9	107.3	1.15	110.2	1.12	118.1	1.04	133.4	0.92		
Discharges/Average Daily Census	115.7	110.2	1.05	112.5	1.03	120.6	0.96	135.3	0.86		
Discharges To Private Residence/Average Daily Census	61.4	41.6	1.48	44.5	1.38	49.9	1.23	56.6	1.09		
Residents Receiving Skilled Care	100	93.2	1.07	93.5	1.07	93.5	1.07	86.3	1.16		
Residents Aged 65 and Older	93.0	95.7	0.97	93.5	0.99	93.8	0.99	87.7	1.06		
Title 19 (Medicaid) Funded Residents	73.2	69.2	1.06	67.1	1.09	70.5	1.04	67.5	1.09		
Private Pay Funded Residents	23.9	22.6	1.06	21.5	1.11	19.3	1.24	21.0	1.14		
Developmentally Disabled Residents	0.0	0.6	0.00	0.7	0.00	0.7	0.00	7.1	0.00		
Mentally Ill Residents	47.9	35.9	1.33	39.0	1.23	37.7	1.27	33.3	1.44		
General Medical Service Residents	16.9	18.1	0.94	17.6	0.96	18.1	0.93	20.5	0.82		
Impaired ADL (Mean)	55.2	48.7	1.13	46.9	1.18	47.5	1.16	49.3	1.12		
Psychological Problems	38.0	52.0	0.73	54.6	0.70	52.9	0.72	54.0	0.70		
Nursing Care Required (Mean)	6.7	6.8	0.98	6.8	0.99	6.8	0.99	7.2	0.93		